

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND	
Case number (if known)	17-19319	

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
11804 Fort Washington Road Fort Washington, MD 20744 Prince Georges County Line from <i>Schedule A/B</i> : 1.1	\$683,255.00	<input checked="" type="checkbox"/> \$23,675.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(2)
Grenada Line from <i>Schedule A/B</i> : 1.2	\$50,000.00	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
2001 BMW 325xi 186,075 miles NADA.com Clean Retail Value \$4,075 Clean Trade-In Value \$2,225 Average Trade -In Value \$1,475 Rough Trade-In Value \$625 Line from <i>Schedule A/B</i> : 3.1	\$1,475.00	<input checked="" type="checkbox"/> \$1,475.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)

Debtor 1 **Ancill L. McDonald-Gilmore**

Case number (if known)

**17-19319**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
<b>Sofa, Loveseat, Coffee table, End tables, Bed, Dresser, Kitchen set, Dining room set, Linens, Small Kitchen Appliances, Buffet Table, China Cabinet, Microwave, Refrigerator, Stove, Dishes, Pots/Pans, Silverware, Desk, Vacuum, W/D, Lawn Mower</b> Line from Schedule A/B: <b>6.1</b>	<b>\$1,130.00</b>	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(b)(4)</b>
<b>Sofa, Loveseat, Coffee table, End tables, Bed, Dresser, Kitchen set, Dining room set, Linens, Small Kitchen Appliances, Buffet Table, China Cabinet, Microwave, Refrigerator, Stove, Dishes, Pots/Pans, Silverware, Desk, Vacuum, W/D, Lawn Mower</b> Line from Schedule A/B: <b>6.1</b>	<b>\$1,130.00</b>	<input checked="" type="checkbox"/> \$130.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(f)(1)(i)(1)</b>
<b>TVs, DVD Players, Radio, Stereo, Computer, Printer</b> Line from Schedule A/B: <b>7.1</b>	<b>\$520.00</b>	<input checked="" type="checkbox"/> \$520.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(f)(1)(i)(1)</b>
<b>Books, Pictures, Antiques, Collections, CD's/Cassettes, Videos</b> Line from Schedule A/B: <b>8.1</b>	<b>\$390.00</b>	<input checked="" type="checkbox"/> \$390.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(f)(1)(i)(1)</b>
<b>Dresses, Blouses/Shirts, Skirts, Pants, Shorts, Jeans, Suits, Coats, Jackets, Shoes, Boots, Athletic shoes</b> Line from Schedule A/B: <b>11.1</b>	<b>\$725.00</b>	<input checked="" type="checkbox"/> \$725.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(f)(1)(i)(1)</b>
<b>Rings, Wedding bands, Necklaces/Chains, Bracelets, Earrings, Watches</b> Line from Schedule A/B: <b>12.1</b>	<b>\$600.00</b>	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(f)(1)(i)(1)</b>
<b>Cash</b> Line from Schedule A/B: <b>16.1</b>	<b>\$300.00</b>	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(b)(5)</b>
<b>Checking: BB&amp;T Bank Business Account 7385</b> Line from Schedule A/B: <b>17.1</b>	<b>\$7,000.00</b>	<input checked="" type="checkbox"/> \$1,160.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(f)(1)(i)(1)</b>
<b>Checking: BB&amp;T Bank Business Account 7385</b> Line from Schedule A/B: <b>17.1</b>	<b>\$7,000.00</b>	<input checked="" type="checkbox"/> \$5,697.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud. Proc. § 11-504(b)(5)</b>

Debtor 1 **Ancill L. McDonald-Gilmore**

Case number (if known)

**17-19319**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
<b>Maryland Skincare Institute LLC</b> D/B/A MSI Beauty Studio 100 % ownership Line from <i>Schedule A/B</i> : <b>19.1</b>	<u>\$1.00</u> Copy the value from <i>Schedule A/B</i>	<input checked="" type="checkbox"/> <u>\$1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud.</b> <b>Proc. § 11-504(b)(5)</b>
<b>American Income Life Insurance</b> Line from <i>Schedule A/B</i> : <b>31.1</b>	<u>\$1.00</u>	<input checked="" type="checkbox"/> <u>\$1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud.</b> <b>Proc. § 11-504(b)(5)</b>
<b>Equipment &amp; Supplies</b> Line from <i>Schedule A/B</i> : <b>39.1</b>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Md. Code Ann., Cts. &amp; Jud.</b> <b>Proc. § 11-504(b)(1)</b>

## 3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

- No  
 Yes

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND	
Case number (if known)	17-19319	

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Creditor's Name	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1 Bayview Loan Servicing, LLC	11804 Fort Washington Road Fort Washington, MD 20744 Prince Georges County	\$297,980.24	\$683,255.00	\$0.00
4425 Ponce de Leon Boulevard, 5th Floor Miami, FL 33146	Number, Street, City, State & Zip Code			

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt**

**Nature of lien.** Check all that apply.

- Contingent
- Unliquidated
- Disputed
- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **7717**

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here:

**\$297,980.24**

**\$297,980.24**

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name, Number, Street, City, State & Zip Code  
**BWW Law Group, LLC**  
**6003 Executive Blvd, Ste 101**  
**Rockville, MD 20852**

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND	
Case number (if known)	17-19319	

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>IRS</b> Priority Creditor's Name <b>Centralized Insolvency Operations</b> <b>PO Box 7346</b> <b>Philadelphia, PA 19101</b> Number Street City State Zip Code	Last 4 digits of account number	\$43,337.50	\$43,337.50
		When was the debt incurred?	2011-2013	
		As of the date you file, the claim is:	Check all that apply	
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
		Type of PRIORITY unsecured claim:		
		<input type="checkbox"/> Domestic support obligations		
		<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government		
		<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
		<input type="checkbox"/> Other. Specify _____		

Debtor 1 Ancill L. McDonald-GilmoreCase number (if known) 17-19319

2.2	Priority Creditor's Name <b>Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101</b>	Last 4 digits of account number <b>\$1,800.00</b>	Case number (if known) <b>17-19319</b>
		<b>When was the debt incurred? 2015</b>	
	<b>As of the date you file, the claim is:</b> Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Type of PRIORITY unsecured claim:</b>		
	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
	<b>Who incurred the debt?</b> Check one.		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
	<b>Check if this claim is for a community debt</b>		
	<b>Is the claim subject to offset?</b>		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

**5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.**

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

**6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.**

<b>Total claims from Part 1</b>	6a. <b>Domestic support obligations</b>	<b>Total Claim</b> 6a. \$ <b>0.00</b>
	6b. <b>Taxes and certain other debts you owe the government</b>	6b. \$ <b>45,137.50</b>
	6c. <b>Claims for death or personal injury while you were intoxicated</b>	6c. \$ <b>0.00</b>
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. \$ <b>0.00</b>
		<b>6e. Total Priority.</b> Add lines 6a through 6d.
<b>Total claims from Part 2</b>	6f. <b>Student loans</b>	<b>Total Claim</b> 6f. \$ <b>0.00</b>
	6g. <b>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</b>	6g. \$ <b>0.00</b>
	6h. <b>Debts to pension or profit-sharing plans, and other similar debts</b>	6h. \$ <b>0.00</b>
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <b>0.00</b>
		<b>6j. Total Nonpriority.</b> Add lines 6f through 6i.

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND	
Case number (if known)	17-19319	

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease		State what the contract or lease is for
	Name, Number, Street, City, State and ZIP Code		
2.1	Name Number Street City State ZIP Code		
2.2	Name Number Street City State ZIP Code		
2.3	Name Number Street City State ZIP Code		
2.4	Name Number Street City State ZIP Code		
2.5	Name Number Street City State ZIP Code		

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND	
Case number (if known)	<b>17-19319</b>	

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

**1. Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- No  
 Yes

**2. Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

**3.1**

Name \_\_\_\_\_

Schedule D, line \_\_\_\_\_

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**3.2**

Name \_\_\_\_\_

Schedule D, line \_\_\_\_\_

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND
Case number (if known)	<b>17-19319</b>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: | Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

**Debtor 1**

- Employed  
 Not employed

**Debtor 2 or non-filing spouse**

- Employed  
 Not employed

Occupation

**Self-employed**

Employer's name

\_\_\_\_\_

Employer's address

\_\_\_\_\_

How long employed there?

#### Part 2: | Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
--------------	--------------------------------------

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ **0.00** \$ **N/A**

3. Estimate and list monthly overtime pay.

3. +\$ **0.00** +\$ **N/A**

4. Calculate gross income. Add line 2 + line 3.

4. \$ **0.00** \$ **N/A**

Debtor 1 Ancill L. McDonald-Gilmore

Case number (if known)

17-19319

Copy line 4 here .....	For Debtor 1	For Debtor 2 or non-filing spouse
5. List all payroll deductions:	4. \$ <u>0.00</u>	\$ <u>N/A</u>
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>N/A</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>N/A</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>N/A</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>N/A</u>
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>N/A</u>
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>N/A</u>
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>N/A</u>
5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+ \$ <u>N/A</u>
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u>0.00</u>	\$ <u>N/A</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <u>0.00</u>	\$ <u>N/A</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>1,299.76</u>	\$ <u>N/A</u>
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>N/A</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>600.00</u>	\$ <u>N/A</u>
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>N/A</u>
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>N/A</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u>0.00</u>	\$ <u>N/A</u>
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>N/A</u>
8h. Other monthly income. Specify: _____	8h.+ \$ <u>0.00</u>	+ \$ <u>N/A</u>
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>1,899.76</u>	\$ <u>N/A</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>1,899.76</u>	+ \$ <u>N/A</u> = \$ <u>1,899.76</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u>0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ <u>1,899.76</u>	
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____	Combined monthly income	

Fill in this information to identify your case:

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>DISTRICT OF MARYLAND</u>
Case number (If known)	<u>17-19319</u>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

##### 2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.  Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Son	12	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes
Son	21	

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 2,559.23

##### If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues  
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<u>0.00</u>
4b. \$	<u>0.00</u>
4c. \$	<u>300.00</u>
4d. \$	<u>0.00</u>
5. \$	<u>0.00</u>

Debtor 1 Ancill L. McDonald-GilmoreCase number (if known) 17-19319

6. <b>Utilities:</b> 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: <b>Cable &amp; Internet Bundle</b>	6a. \$ <u>404.00</u> 6b. \$ <u>175.00</u> 6c. \$ <u>149.00</u> 6d. \$ <u>115.00</u>
7. <b>Food and housekeeping supplies</b>	7. \$ <u>737.00</u>
8. <b>Childcare and children's education costs</b>	8. \$ <u>0.00</u>
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>125.00</u>
10. <b>Personal care products and services</b>	10. \$ <u>100.00</u>
11. <b>Medical and dental expenses</b>	11. \$ <u>0.00</u>
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>225.00</u>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>125.00</u>
14. <b>Charitable contributions and religious donations</b>	14. \$ <u>125.00</u>
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify:	15a. \$ <u>189.00</u> 15b. \$ <u>549.00</u> 15c. \$ <u>289.00</u> 15d. \$ <u>0.00</u>
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$ <u>0.00</u>
17. <b>Installment or lease payments:</b> 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: <b>School Tuition</b> 17d. Other. Specify:	17a. \$ <u>0.00</u> 17b. \$ <u>0.00</u> 17c. \$ <u>709.00</u> 17d. \$ <u>0.00</u>
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>
19. <b>Other payments you make to support others who do not live with you.</b> Specify:	19. \$ <u>0.00</u>
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b> 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues	20a. \$ <u>0.00</u> 20b. \$ <u>0.00</u> 20c. \$ <u>0.00</u> 20d. \$ <u>0.00</u> 20e. \$ <u>0.00</u>
21. <b>Other:</b> Specify:	21. +\$ <u>0.00</u>
22. <b>Calculate your monthly expenses</b> 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>6,875.23</u> \$ \$ <u>6,875.23</u>
23. <b>Calculate your monthly net income.</b> 23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I. 23b. Copy your monthly expenses from line 22c above.	23a. \$ <u>1,899.76</u> 23b. -\$ <u>6,875.23</u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>-4,975.47</u>
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain here: _____

**Fill in this information to identify your case:**

Debtor 1	<b>Ancill L. McDonald-Gilmore</b>	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF MARYLAND	
Case number (if known)	17-19319	

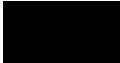
Check if this is an amended filing

**Official Form 106Dec****Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.



Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Ancill L. McDonald-Gilmore

Ancill L. McDonald-Gilmore

Signature of Debtor 1

Date August 9, 2017

X

Signature of Debtor 2

Date